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PTO/SB/01 (12-97)

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			Att rney Docket Nu	mber	069035.00001				
DECLARATION FOR UTILITY OR DESIGN			First Named Invento	or	Daniel L. McConnell				
PATE		APPLICATION	COMPLETE IF KNOWN						
(37 CFR 1.63)			Application Number	Not Assigned					
- · ·			Filing Date	Sim	ultanteously Herewith				
Declaration Submitted	OR	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit	Not	Assigned				
with Initial Filing			Examiner Name	Not	Assigned				

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
Portable Personal Wireless Interactive Video Device And Method										
Of Using The Same										
the specification of which (Title of the Invention)										
is attached hereto OR										
as United States Application Number or PCT International										
Application Number and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.										
Tacknowledge the duty to disclose information which is material to paternability as defined in 57 GFR 1.50.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certifled Copy Attached? YES NO							
		0000	0000							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Number(s) Filing Date (MM/DD/YYYY) 60/196,327 04/12/2000 Additional provisional application										
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DECLARATION — Utility or Design Patent Application

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United States of United States of information wh	of Americ or PCT In ich is ma	fit under 35 U.S.C. ca, listed below and ternational applicati terial to patentabilit international filing c	i, insofa on in th y as de	ar as the le manner efined in 3	subje prov 7 CF	ect matter of ded by the R 1.56 wh	of each	h of th	he cla	ims of th	nis applic	cation is Lackno	s not disclosed wledge the dut	in the prior to disclose	
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)							
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Name				Registration Number				Name					stration mber		
James H.				27,115				Enrique J. Mo			ora			36,875	
David G.				34,865				Terry M. Sanks					45,06		
Robert L. Wolter				36,972											
Additional r	egistered	practitioner(s) nam	ned on s	suppleme	ntal F	Registered	Practiti	ioner	Inforn	nation she	eet PTO	/SB/020	C attached here	eto.	
Direct all corre	esponde			r Numbe de Labe						OR	С	orresp	ondence add	ress below	
Name	Dav	id G. Maire													
Address	Holl	and & Knigh	t LL	.P	•								·		
Address	P. O	Box 1526											-		
City	Orla	ındo						ate	Fl	·	ZIP	3280	02-1526		
Country	U.S	S. Telephone (40) 24	4-1	179		Fax	(407	7) 244-52	88	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									o made are						
Name of Sole or First Inventor:							A petition has been filed for this unsigned inventor								
Given Name (first and middle (if anyl)							Family Name or Surname								
Daniel L.					_	McConnell									
Inventor's Signature			<u> ()</u>	JLM C				onnel					Date	8 200	
Residence: City		Longwood		Sta	te i	FL	Co	untry		U.S.			Citizens <u>hip</u>	U.S.	
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DECLARATION

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname							
Thomas G. Smith												
inventor's Signature	The San					P ——	_	Date		اعلملا		
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Post Office Address												
City	Titusville		State	FL		ZIP	32780	Country	, US	<u> </u>	-	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor									ventor			
Given Name (first and middle [if any]) Family Name or Sumame												
Thomas	Golden											
inventor's Signature	Thomas Holden							Da	Date 4/6			
Residence: City	Lake Mary	5	State	FL		Country	US		Citize	nship	US	
Post Office Address	938 Framlingham Court											
Post Office Address						.				·		
City	Lake Mary		State	FL		ZIP	32746	Coun	ntry	US		
Name of Addition	nal Joint Inventor, if ar	ıy:				A petition	on has been fil	ed for th	is unsigi	ned inv	ventor	
Given Name (first and middle [if any])						Family Name or Surname						
Thomas D.	D. Laing											
inventor's Signature	Date 4/6/20									4/6/2001		
Residence: City	Sanford	5	State	FL		Country	US		Citize	nship	US	
Post Office Address	123 Kelly Circle											
Post Office Address			_									
City	Sanford FL ZIP 32773 Country US									S		

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